## "CORRECTED" REPORT

U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only  AUG 152005  E  READ THE INSTRUCTIONS CAREFUL	LY BEFORE PREPARING THIS REPORT.		
443 08			
1. File Number U - 03104	2. Fiscal Year Covered From:		
6/35	10 / 1 / 2003 Through: 9 / 30 / 2004		
3. Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name James M Donohue	Name   Communications Workers of America, Local 3104		
	Labor Organization File Number 027-050		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street 1361 S Ocean Blvd, Apt 406	Street 3121 SW 15 Street		
City Pompano Beach	City Pompano Beach		
State Florida ZIP Code + 4 33062-7160	State Florida ZIP Code + 4 33069-4806		
5. Position in labor organization.  PRESIDENT			
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):			
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizati	derived income or other economic benefit of on represents or is actively seeking to represent.		
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name Vince Rubiera	Six (6) meetings with BellSouth Corp Quality Process - LGP Process.		
Trade Name, if any: BellSouth Telecommunications	\$200 (Miscellaneous hotel) SEE ATTACHED.		
P.O. Box, Bldg., Room No., if any	7.b. Amount.		
Street 250 SW 62 Avenue, 3rd Floor	7.b. Amount.		
City Hollywood	\$3,101		
State Florida ZIP Code + 4 33023			

Signed James Lorohue

On 08/12/2004

Date

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

954-970-3104, Ext 12

Telephone Number

Name of Person Filing James Donohue	File	Number <b>U-</b> 03104	
B. Held an interest in or derived income or economic benefit with monetary value <b>from a business</b> (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
8. Name and address of Business (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	9. Business deals with:  a. Labor Organization b. Trust c. Employer		
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name	11.a. Nature of such dealing.		W The state of the
P.O. Box, Bldg., Room No., if any			
Street	11.b. Approximate dollar value of s	such dealing.	
La company and a	12.a. Nature of interest held or income received.		
City	12.a. Nature of interest held or in	ncome received.	
State ZIP Code + 4 (attraction of the state	12.a. Nature of interest held or in	ncome received.	
		ncome received.	
	12.b. Amount.	ncome received.	
State ZIP Code + 4  C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant	12.b. Amount.	ncome received.	
State ZIP Code + 4  C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money)  13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name	12.b. Amount.  r parts A and B above) or other thing of value.	ncome received.	
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money  13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:	12.b. Amount.  r parts A and B above) or other thing of value.	ncome received.	
State ZIP Code + 4  C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money)  13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name	12.b. Amount.  r parts A and B above) or other thing of value.	ncome received.	
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money  13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:	12.b. Amount.  r parts A and B above) or other thing of value.	ncome received.	
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money  13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any	12.b. Amount.  r parts A and B above) or other thing of value.	ncome received.	
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money  13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street	12.b. Amount.  r parts A and B above) or other thing of value.	Come received.	

Business Unit: Related Voucher ID: Voucher ID: BST 13463089

> Last Updated By: GRIFFIN, C A

BWXRDGS

(954) 985-5553

Last Update Date: 01/19/04

Origin:

ONL

Voucher Entry Status:

Taxes Applied

Posted

Supplier ID: 511947980E DONOHUE, JAMES

Supplier Loc:

1361 S OCEAN BLVD

#406

,FL 33062

POMPANO BEACH

954/970-3104

Entered By: Entered Invoice Date: Date: 01/14/04 GRIFFIN, C A 01/19/04

Invoice ID:

011404

Certifier: GRIFFIN, C A

BWXRDGS

(954) 985-5553

SECRETARY

Approver: WILSON III, R L

PKWGZFS

PROJECT MANAGER, LEVEL 3

Net Days:

000 0.00%

Disc Days: 000

Disc Pct:

Payment Terms: 00 Voucher Post Status: Voucher Post Action:

\$624.88 \$0.00

BWXRDGS

\$0.00

Freight Amt: Sales Tax: Invoice Amt:

BST File Nbr: Contract Nbr: 02220313

Business Rsn: Travel Expenses incurred for CWA president to attend BAPCO mtg with Keith Jackson

DONOHUE, JAMES

Remit Supplier Loc: 1 Remit Supplier ID:

511947980E

\$624.88 \$0.00

Pymnt Status: Paid

Pymnt Pymnt Pymnt

Disc: Amt: Pymnt

Nbr:

ID:

0002151526

Pymnt Msg:

Pymnt Hndl Cd: RE

Pymnt Due Dt: 01/14/04

Pymnt 01/20/04

Pymnt Mthd:

0001	Acct Line	Invoice Line Nu Invoice Line Am Invoice Line Qt Purchase Order: Ship To Info:	Business Unit: Voucher ID: Related Vouche
\$624.88	Amount	Invoice Line Num: Invoice Line Amt: Invoice Line Qty: Purchase Order: Ship To Info:	Business Unit: Voucher ID: Related Voucher ID:
.88 0 C6D	Work Asset Prod  Qty ID Cat Group St Code OCC GMA		BST 13463089
CP RB4017111	E S GLC C RE Reason ID Plan ID Req Misc Data Misc Track Data	RTC: 481 CONTRACT LABOR & SERVICE-OTHER Taxable Ind: N 55 OTHER SERVICES Form M Cat: N 1099 Type: 07	Last Updated By: GRIFFIN,C A  BWXRDGS  Last Update Date: 01/19/04

Voucher ID: Business Unit: Related Voucher ID: BST 13508055 Last Updated By: GRIFFIN, C A Last Update Date: 02/03/04 BWXRDGS (954) 985-5553

Origin:

ONL

Taxes Applied

Posted

Payment Terms: 00 Voucher Post Status: Voucher Post Action: Voucher Entry Status:

Net Days: Disc Pct:

> 000 0.00%

Disc Days: 000

Supplier ID: Supplier Loc: 511947980E DONOHUE, JAMES

#406 1361 S OCEAN BLVD

POMPANO BEACH

,FL 33062

954/970-3104

Invoice ID: 1/21/04

01/21/04

Entered Date: Invoice Date: Entered By: GRIFFIN, C A 02/03/04

BWXRDGS

Certifier: GRIFFIN, C

BWXRDGS

(954) 985-5553

SECRETARY

Approver: WILSON III, R L

PROJECT MANAGER, LEVEL 3

PKWGZFS

\$0.00 \$0.00

\$491.63

Sales Tax:

Invoice Amt:

Freight Amt:

Contract Nbr:

BST File Nbr: 02230678

Business Rsn: Travel expenses incurred for CWA Pres to attend BAPCO mtg with Keith Jackson.

DONOHUE, JAMES

Remit Supplier ID:

511947980E

\$491.63 Remit Supplier Loc:

Pymnt Disc: Pymnt Status: Paid

Pymnt Nbr:

0002157052

\$0.00

Pymnt Amt: Pymnt ID:

Pymnt Hndl Cd: Pymnt Msg:

Pymnt Due Dt: 02/04/04 01/21/04

Pymnt Mthd: Pymnt Dt:

0001	Acct Line	Invoice Line Num: Invoice Line Amt: Invoice Line Qty: Purchase Order: Ship To Info:	Business Unit: Voucher ID: Related Vouche
\$491.63	Amount	Num: Amt: Qty:	Business Unit: Voucher ID: Related Voucher ID:
63 3	Qty	001 1	BST 13508055
0	]   	TRAVEL EXPENSES \$491.63 0	İ
	Work	EL EXPEN \$491.63 0	
C6D	Asset Prod		
	Prod Code OCC		
	GMA	R	
	GLC	RTC: 481	
CP		OI .	
P RB4017111	E Reason ID Plan ID	CONTRACT LABOR & SERVICE-OTHER OTHER SERVICES	Last Updated By: GRIFFIN,C A BWXRDGS Last Update Date: 02/03/04
	Req Misc Data	CE-OTHER	C A
	a Misc Track Data	Taxable Ind: Form M Cat: 1099 Type:	
	Data	07	

Voucher ID: Business Unit:

Related Voucher ID:

Supplier Loc: Supplier ID:

511947980E DONOHUE, JAMES

#406

1361 S OCEAN BLVD

POMPANO BEACH

, FL

33062

954/970-3104

Entered Date:

03/09/04 03/02/04 03022004

GRIFFIN, C A

BWXRDGS

\$277.70

\$0.00 \$0.00

Invoice Date: Invoice ID:

13608702

BST

Last Updated By: GRIFFIN, C A

BWXRDGS

(954) 985-5553

Last Update Date: 03/09/04

Origin: ONL

Voucher Entry Status: Taxes Applied

Voucher Post Action:

Voucher Post Status: Posted

Disc Pct: Payment Terms: 00 0.00%

Net Days:

000

Disc Days: 000

Certifier: GRIFFIN, C

SECRETARY

BWXRDGS

(954) 985-5553

Approver: WILSON III, R L PKWGZFS

PROJECT MANAGER, LEVEL 3

Business Rsn: Travel expenses incurred for CWA Pres to attend BAPCO mtg requested by Keith Jackson.

Pymnt Nbr:

BST File Nbr: Contract Nbr: Freight Amt: Sales Tax: Invoice Amt: Entered By:

02264135

0002171500

\$277.70

\$0.00

Pymnt Amt: Pymnt ID:

Pymnt Disc: Paid

Pymnt Status:

Pymnt Msg:

Pymnt Hndl Cd: RE

Pymnt Pymnt Dt: Due Dt: 03/02/04 03/10/04

Pymnt Mthd:

Remit Supplier ID: 511947980E DONOHUE, JAMES

Remit Supplier Loc:

## STAR VOUCHER PRINT

0001	Acct	Invoice Line Nu Invoice Line Am Invoice Line Qt Purchase Order: Ship To Info:	Business Unit: Voucher ID: Related Vouche
\$277	Amount	Invoice Line Num: 001 Invoice Line Amt: Invoice Line Qty: Purchase Order: Ship To Info: 0, ,	Business Unit: Voucher ID: Related Voucher ID:
	1	001	
	Qty	TRAVEL \$;	BST 13608702
0	Work ID	JEL E. \$27	2
C6D	rk Ca	%277.70 \$277.70 0	
Ü	Asse Cat Group	TRAVEL EXPENSES FOR CWA PRES \$277.70 0	
	e t	DR CWI	
	Prod Code	PRE	
	Vork Asset Prod ID Cat Group St Code OCC		
	GMA	RT	
	GLC	RTC: 481	18 18 19 11 18
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84017111	ason ID	CONTRACT LABOR OTHER SERVICES	Last
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	Plan ID	& SER	ated ]
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	Req Misc Data	~	Last Updated By: GRIFFIN,C A BWXRDGS Last Update Date: 03/09/04
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	Misc	Taxable Ind Form M Cat: 1099 Type:	
	Track	Taxable Ind: Form M Cat: 1099 Type:	11 11 11 11
	Misc Track Data	0 Z Z	Last Updated By: GRIFFIN,C A  BWXRDGS  Last Update Date: 03/09/04
			ii

Voucher ID: Business Unit: BST

Related Voucher ID:

13851075

Last Updated By: GRIFFIN, C BWXRDGS D

(954) 985-5553

Last Update Date: 05/27/04

Origin:

ONL

Taxes Applied

Posted

511947980E DONOHUE, JAMES

Supplier Loc: Supplier ID:

#406 1361 S OCEAN BLVD

POMPANO BEACH

,FL 33062

954/970-3104

Invoice ID:

052404

Certifier: GRIFFIN, C A

SECRETARY

(954) 985-5553

BWXRDGS

Net Days: Disc Pct:

000 0.00%

Disc Days: 000

Payment Terms: 00 Voucher Post Status: Voucher Post Action: Voucher Entry Status:

Approver: WOLINSKY JR, SAUL

BFHZSCH

AREA MANAGER-OSP FACILITY

Invoice Date: 05/24/04

Entered By: Entered Date: GRIFFIN, C A 05/27/04

Invoice Amt:

\$475.21

BWXRDGS

Freight Amt: Sales Tax: \$0.00 \$0.00

BST File Nbr: Contract Nbr: 02291579

Business Rsn: expenses incurred for CWA Pres to attend BAPCO mtg requested by Keith Jackson

Disc: Amt: ID: \$475.21 \$0.00

0002203761

Remit Supplier Loc: Remit Supplier ID:

511947980E

DONOHUE, JAMES

Pymnt Status: Paid

Pymnt

Pymnt

Pymnt Pymnt Nbr:

Pymnt Msg:

Pymnt Hndl Cd: RE

Pymnt Due Dt: 05/24/04

Pymnt Dt: 05/28/04

Pymnt Mthd:

## STAR VOUCHER PRINT

0001	Acct	Invoice Line Nu Invoice Line Am Invoice Line Am Invoice Line Qt Purchase Order: Ship To Info:	Business Unit: Voucher ID: Related Vouche
\$475.21	Amount	Num: Amt: Qty:	Business Unit: Voucher ID: Related Voucher ID:
1		001	
 	Qty	TRA:	BST 13851075
0 1	H C	RAVEL E \$47	5
C6D	rk Asset	TRAVEL EXPENSES FOR CONTRACTOR \$475.21 0	
	Prod Code OCC		
	GMA	i I	
	GLC	RTC: 481	
Ω	CSE	55 Q	
CP RB4017111	E Reason ID Plan ID	CONTRACT LABOR & SERVICE-OTHER OTHER SERVICES	Last Updated By: GRIFFIN,C A BWXRDGS Last Update Date: 05/27/04
	Req Misc Data	JE-OTHER	GRIFFIN,C A BWXRDGS : 05/27/04
	a Misc Track Data	Taxable Ind: Form M Cat: 1099 Type:	
	Data	07	

Business Unit:

Voucher ID: 13867589

Related Voucher ID:

Last Updated By: GRIFFIN, C A

BWXRDGS

(954) 985-5553

Last Update Date: 06/03/04

Origin: ONL

Supplier ID: 511947980E DONOHUE, JAMES

Supplier Loc:

#406 1361 S OCEAN BLVD

POMPANO BEACH

,FL 33062

954/970-3104

Invoice ID: 060104

Invoice Date:

06/03/04

Entered By: Entered Date: 06/03/04 GRIFFIN, C A

BWXRDGS

Certifier: GRIFFIN, C A

BWXRDGS

(954) 985-5553

SECRETARY

Net Days:

000 0.00%

Disc Days: 000

Disc Pct:

Payment Terms: 00 Voucher Post Status: Voucher Post Action: Voucher Entry Status:

Taxes Applied

Posted

Approver: WOLINSKY JR, SAUL

BFHZSCH

AREA MANAGER-OSP FACILITY

Sales Tax: Invoice Amt: \$484.85 \$0.00

\$0.00

Contract Nbr:

Freight Amt:

BST File Nbr: 02294105

Business Rsn: Expenses incurred for CWA Pres to attend BAPCO mtg at the request of Keith Jackson

Remit Supplier Loc: Remit Supplier ID:

511947980E

DONOHUE, JAMES

Pymnt ID: 0002206155

Pymnt Nbr:

Pymnt Amt: \$484.85

Pymnt Disc:

\$0.00

Pymnt Status: Paid

Pymnt Msg:

Pymnt Hndl Cd: RE

Pymnt Due Dt: 06/03/04

Pymnt Dt: 06/04/04

Pymnt Mthd: CHK

Business Unit: Related Voucher ID: Voucher ID: BST13867589 Last Updated By: GRIFFIN, C.A Last Update Date: 06/03/04 BWXRDGS

Invoice Line Qty: Purchase Order: Invoice Line Amt: Invoice Line Num: 001 TRAVEL EXPENSES \$484.85 RTC: 481 5 OTHER SERVICES CONTRACT LABOR & SERVICE-OTHER

Ship To Info:

0, FL 1099 Type:

Form M Cat: Taxable Ind:

07 N

Line Acct Amount Qty Work ID Cat Group St Code OCC Asse Prod GMA GLC C ß H 떳 Reason ID Plan ID Req Misc Data Misc Track Data

CP RB4017111

0001

\$484.85

0

C6D

Voucher ID: Business Unit: BST 14093712

Related Voucher ID:

Supplier Loc:

Supplier ID:

511947980E

DONOHUE, JAMES

Last Updated By: GRIFFIN, C A BWXRDGS

(954) 985-5553

Last Update Date: 08/18/04

Origin:

Voucher Entry Status: Taxes Applied

ONL

Voucher Post Action:

Posted

Payment Terms: 00 Voucher Post Status:

Net Days: Disc Pct:

> 000 0.00%

Disc Days: 000

Certifier: GRIFFIN, C A

BWXRDGS

(954) 985-5553

SECRETARY

Approver: WOLINSKY JR, SAUL

BFHZSCH

AREA MANAGER-OSP FACILITY

, FL 33062

954/970-3104

POMPANO BEACH

#406

1361 S OCEAN BLVD

Invoice ID: 081604

Entered Date: 08/18/04

Invoice Date:

08/16/04

Entered ву: GRIFFIN, C A

BWXRDGS

\$549.27 \$0.00

\$0.00

Freight Amt: Sales Tax: Invoice Amt:

Contract Nbr:

BST File Nbr: 02333894

Business Rsn: Expenses incurred for CWA President to attend BAPCO mtg at the request of Keith Jackson

Pymnt Amt: Pymnt Pymnt Nbr: ID: 0002235271 \$549.27

> Remit Supplier Loc: 1 Remit Supplier ID:

511947980E

DONOHUE, JAMES

Pymnt Disc:

\$0.00

Pymnt Status: Paid

Pymnt Hndl Cd: Pymnt Msg:

Pymnt Pymnt Due Dt: 08/19/04 08/16/04

Pymnt Mthd:

Related Voucher ID: Voucher ID: Business Unit: Ship To Info: Purchase Order: Invoice Line Qty: Invoice Line Amt: Invoice Line Num: Line Acct Amount 001 0, 14093712 Qty TRAVEL EXPENSES FL \$549.27 Work ID Cat Group St Asset Code OCC Prod GMA RTC: 481 GLC 55 Ω ഗല OTHER SERVICES ŖΕ CONTRACT LABOR & SERVICE-OTHER CP RB4017111 Reason ID Plan ID Last Updated By: GRIFFIN, C A Last Update Date: 08/18/04 Req Misc Data Misc Track Data BWXRDGS 1099 Type: Form M Cat: Taxable Ind: 07

0001

\$549.27

0

C6D